**School Name**: Click here to enter text.

**Primary Contact Person**

Name: Click here to enter text.

Phone: Click here to enter text.

e-mail address: Click here to enter text.

**Booth Information**

**Cafeteria and 6 ft. rectangular tables will be available for your use. Please indicate your need in the form below.**

Table Choice: Choose an item.

Number of tables needed: Choose an item.

Electricity (not for recharging use)Choose an item.

Floor space needed to demo robot (4x6 display area):Choose an item.

**Special requests/comments**

Mentor’s Name/Information.

Special Requests/Comments.